TLAC
TLAC Blurb

Hello Latin America & Canada!

Check out *your* website at: http://tricare15.army.mil

- **The FY 2003 Spring POC Conference**
- **The Health Insurance Portability and Accountability Act (HIPAA)**
- **TRICARE Formulary Information on the Web**

TRICARE
Latin America & Canada

The FY 2003 Spring POC Conference

We would like to thank all the conference speakers for their hard work in providing the most up to date information to our attendees at this year's Spring POC Conference! Fantastic job! Congratulations to the POCs of the New Program Year; HM1 Kirkpatrick (Andros Island), TSgt Hererra (Bolivia) and Maria Bulnes-Castillo (Honduras)!

The Conference Action Items Lists is attached to this email. Some of the items have already been answered. Please review the attachment for the latest updates from your action items. There are additional attachments that were requested at the conference, (see email for the list).

All of the comments concerning the location of the conference were positive. There was plenty to do within walking distance or a short cab ride. The shuttle ($18) to and from the airport/hotel was good if traveling solo, however, it was less expensive to take a cab ($24) if traveling two or more.

The Health Insurance Portability and Accountability Act (HIPAA) of 1996

Everyone asked for this information again.

The Health Insurance Portability and Accountability Act (HIPAA) is federal legislation focused on protecting Private Health Information (PHI) at all levels of care; from the health record, including methods and disclosure of its contents; provider visit information; billing methods and electronic protection; to insurance records including TRICARE enrollment, claims, discussions and transmission of PHI among TRICARE entities and business associates.

The following are being incorporated into the SOP for the Lead Agent Office, TRICARE Health Services Region 15 HIPAA Privacy rules concerning discussion and electronic transmission of PHI.
- PHI must not be discussed where others can overhear it when medical or privacy act information is identifiable to a person.
- PHI that is transmitted via Electronic Mail (*e*Mail) must be entered into a document file and password protected. The password for all *e*Mail within TLAC should be upper case TLAC.
- The password protected document should then be attached to the *e*Mail for transmission to another TRICARE entity. (PHI must only be sent to another business associate that requires that information to complete necessary work.)
- *e*Mails and fax cover sheets must have the following statement on it:
  - FOR OFFICIAL USE ONLY
  - Information in this message is for use only by the intended recipient and protected under USC10, Section 1102, Not releasable without permission of sender. Privacy Act of 1974 applies.
  - Information in this message containing Individually Identifiable Health Information is protected by the Health Insurance Portability and Accountability Act (HIPAA). Appropriate safeguards must be used to prevent disclosure.

TRICARE Formulary (Authorized Medication) Information

The Core Formulary listed on the web is a list of medications that ARE reimbursable: http://www.pec.ha.osd.mil/BCF/BCF_genr_pf.htm. Some medications have quantity limits: http://www.pec.ha.osd.mil/qtylimit.htm. Other medications require pre-authorization: http://www.pec.ha.osd.mil/PA_Criteria_and_forms.htm. Be sure and read the special notes and definitions! If a medication is NOT listed on the formulary – you will not be reimbursed!

WPS Customer Service Phone Numbers for TRICARE Overseas are 608.301.2310 and 608.301.2311

Toll Free Phone 888.777.8343, Option #3   Commercial Phone 706.787.2424 Commercial Fax 706.787.3024 Website http://tricare15.army.mil

"Brace" Yourself! Know Your TRICARE ADFM Orthodontic Benefits

Orthodontic treatment ("braces") helps achieve balance and harmony between the teeth and face for an attractive and healthy smile. This can enhance self-esteem and ultimately improve quality of life. Properly aligned teeth are easier to brush and may decrease the tendency to develop tooth decay or gum disease. A correct bite helps distribute the chewing forces throughout the mouth to minimize excessive stress on bones, gum tissues and jaw joints.

The TRICARE Family Member Dental Program offers coverage for orthodontic treatment up to a lifetime maximum of $1,500 per family member. Family members who are eligible are spouses up to age 23 and children up to age 21 (age 23 if full-time students). There are some steps that you need to follow prior to the beneficiary initiating orthodontic treatment. This process is done to protect the beneficiary and ensure that the proposed treatment plan is appropriate. The steps necessary to obtain pre-authorization for orthodontic treatment will be reviewed and other facts will be presented that should make you a better dental consumer.

The Pre-Authorization "Orthodontic Package"

In order to evaluate a request for AD orthodontic care, a complete orthodontic package needs to be submitted in English and mailed to the TRICARE Support Office (TSO). The package must include the following information:

- **The United Concordia Non-Availability and Referral Form**

The sponsor must complete blocks 1-9, 11, 15 and sign the form. All information requested is important for pre-authorization of treatment. A TLAC Authorized Orthodontist from the approved Lead Agent list must provide the treatment.

- **Proposed Orthodontic Treatment Plan and Estimated Length of Treatment**

Your orthodontist should provide this information to you. This detailed plan must include a problem list and objectives, sequence and length of treatment. The orthodontist must indicate the type of appliances to be used to achieve the proposed plan.

- **Orthodontic Diagnostic Records**

The orthodontist will obtain orthodontic study records prior to initiating treatment. You must submit the original or a copy of the complete diagnostic records. The records must include: 1) properly trimmed or articulated stone models of the patient's teeth, 2) photos of the patient's face (front and profile views), 3) photos of the patient's teeth (front, left and right sides, and each arch) and 4) panoramic and cephalometric (facial profile) X-rays. All records need to be submitted for review in order to establish the best course of treatment and to evaluate the proposed treatment plan by your orthodontist. These records will be returned to you once they are reviewed. Please use adequate packaging materials since the stone models are very fragile.

Timing of Orthodontic Treatment

One of the most difficult decisions you are faced with is deciding when to start orthodontic treatment, since TRICARE provides $1,500 lifetime limited coverage per beneficiary. The American Association of Orthodontists recommends that all children have an orthodontic screening no later than age 7. This does not mean that every child age 7 requires braces. The importance of this screening exam is to determine any potential problems that may be able to be addressed early during the child's growth and development. In general, active orthodontic treatment ranges from 1 to 3 years depending on the severity of the problem and the cooperation of the patient. In certain situations, which require some type of growth modification, treatment may be done in multiple phases and may require a longer period of time to be completed.

Treatment timing is important to the orthodontist, and it is also very important to you in order to be a wise dental consumer. The reason we request the sponsor's rotation date and the estimated length of treatment is to try to protect your money. You must understand that if the treatment is not completed at one location, the orthodontist that continues the care may charge a transfer fee or full fee and you may have already spent your lifetime coverage. In some situations, it is best to wait until you are able to complete the treatment at the same location. Other situations require starting treatment early in order to intercept some potential problems.

Continuation of CONUS Orthodontic Treatment

If orthodontic treatment was initiated in CONUS and the OCONUS orthodontist plans to continue the original treatment plan, then you must submit a completed Non-Availability and Referral Form, a copy of the original treatment plan, and a signed statement from the OCONUS orthodontist that the original treatment plan will be continued. If the OCONUS orthodontist wants to change the treatment plan, pre-authorization is required the same as if for a new case.

Submit AD pre-authorization requests to: Commander DDEAMC, LASE – B38801, Fort Gordon GA 30905-5650
Or call us toll free at: 888-777-8343, Option #3, commercial 706-787-2424, or DSN 773-2424.

Toll Free Phone 888.777.8343, Option #3 Commercial Phone 706.787.2424 Commercial Fax 706.787.3024 Website http://tricare15.army.mil

Transcom Regulating and Command & Control Evacuation System (TRAC2ES)

The mission of the Transcom Regulating and Command & Control Evacuation System (TRAC2ES) is to combine transportation, logistics, and clinical decision elements into a seamless patient movement automated information system. It will be capable of visualizing, assessing, and prioritizing patient movement requirements, assigning proper resources, and distributing relevant data to deliver patients efficiently. The system automates the processes of medical regulation (assignment of patients to suitable medical treatment facilities) and Aeromedical evacuation during peace, war, and contingency operations. TRAC2ES will automate Global/Theater Patient Movement Requirements Center operations at HQ USTRANSCOM, HQ USPACOM, and HQ USEUCOM.

TRAC2ES will replace two existing legacy systems: the Defense Medical Regulating Information System and the Automated Patient Evacuation System. Neither of these systems can be economically modified to provide functionality that can be an integral part of the Global Transportation Network (DoD's transportation automated information system) and the Theater Medical Information Program (DoD's deployable medical automated information system). TRAC2ES supports the *Joint Vision 2010* concept of *focused logistics* by fusing information, logistics, and transportation technologies to provide rapid medical regulation and patient evacuation during crisis situations. It enables a deployed force to be more efficient in protecting lives and reduces the size of its logistic tail.

BACKGROUND INFORMATION

TRAC2ES was originally planned to be a module of the Global Transportation Network. In late 1996, however, DoD decided to develop TRAC2ES as a separate system. Functional and technical responsibilities were assigned to the USTRANSCOM Surgeon General, with input from the ASD (Health Affairs). In August 1997, technical program responsibility was transferred to the Air Force, and AFOTEC was assigned as the independent OTA. TRAC2ES was granted Milestone IIA in July 1998, which included the authority to award a development contract.

TEST & EVALUATION ACTIVITY

A TEMP has been developed and is awaiting additional input from the newly selected development contractor before it can support testing. Meanwhile, AFOTEC is working with user representatives to develop mission-level requirements that can be tested comprehensively during independent OT&E that will follow combined DT/OT currently scheduled for March 2000.

TEST & EVALUATION ASSESSMENT

Since TRAC2ES is both a medical and a transportation system, the operational testers will need to be qualified in both fields. The system must meet the needs of the transporters, the medical providers (at both ends), and also the needs of the patients. The testers will have to deal with the technical challenges inherent in a new system with numerous interfaces, as well as the operational challenges of a system that crosses different disciplines. DOT&E has been working closely with the medical and transportation functional communities, AFOTEC, and TRAC2ES Program Management Office (PMO) to address these challenges to develop a comprehensive and effective test and evaluation plan. AFOTEC and the TRAC2ES PMO have developed a Combined Test Force concept to integrate OT&E into the early stages of the acquisition process to facilitate testing for learning. Early deficiency identification and resolution as well as incremental requirement refinement can be achieved as a result. In addition, a mission-level evaluation methodology has been adopted to gain understanding of how well the TRAC2ES is supporting the medical regulation and evacuation missions.